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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3,73(b).					
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naten lie bne vne	agent(s) to represent the underst applications easigned only to the mm in scoordance with 37 CFR 3	e undersigned accor	led States Petent and Tr	ademark Office (USP gnmen) records or as	TO) in connection with signment documents
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Aseignee Name and Address. C.H.I. Development Mgmt. Ltd. XIV, LLC 2711 Centerville Road, Sulle 400 Willmington, Delaware 19808					
filed in each a	form, together with a state pplication in which this form its appointed in this form if tify the application in which	n is used. The st the appointed pro this Power of At	atement under 37 CF actitioner is authoriz torney is to be filed.	R 3.73(h) may be	to ano vel basslemon
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee					
Signature	Marken		Date	1/9/2	-009
Name	Sheryl Parkinson		Teleph	one	
Title	Authorized Person for C.H.I. Development Mgmt, XIV, LLC				